

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 3  
 FOR SE OF FORM 24/48

|  |  |   |
|--|--|---|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOM PIONEERS ACTION NETWORK</b>  |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00517433       </div> |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |   |

|  |             |   |  |
|--|-------------|---|--|
| Full Name of Payee<br><b>Brand.com</b>                       |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><div style="display: flex; justify-content: space-around;"><div>05</div><div>12</div><div>2014</div></div> |  |
| Mailing Address 601 Walnut St<br>Ste 701E                    |             | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">10000.00</div>   |  |
| City<br>Philadelphia   | State<br>PA | Zip Code<br>19106   | Transaction ID : SE.4223   |
| Purpose of Expenditure<br>Internet Communications Consulting |             | Category/Type   | Date of Disbursement or Obligation<br>MM / DD / YYYY   |
| Name of Federal Candidate<br>SHANE OSBORN                    |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose  | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE |
| Calendar Year-To-Date<br>Per Election for Office Sought      |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                         |  |

|   |             |   |  |
|---|-------------|---|--|
| Full Name of Payee<br><b>Majority Strategies</b>                  |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><div style="display: flex; justify-content: space-around;"><div>05</div><div>12</div><div>2014</div></div> |  |
| Mailing Address 135 Professional Drive<br>Suite 104               |             | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">19714.50</div>   |  |
| City<br>Ponte Vedra Beach   | State<br>FL | Zip Code<br>32082   | Transaction ID : SE.4217   |
| Purpose of Expenditure<br>Advertising Services and Communications |             | Category/Type   | Date of Disbursement or Obligation<br>MM / DD / YYYY   |
| Name of Federal Candidate<br>SHANE OSBORN                         |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose  | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE |
| Calendar Year-To-Date<br>Per Election for Office Sought           |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                         |  |

|  |   |
|--|---|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <div style="border: 1px solid black; padding: 2px; display: inline-block;">29714.50</div> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>         |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>         |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Luke McAlpin

[Electronically Filed]

Date

 MM / DD / YYYY  
 05 / 14 / 2014

Signature

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB  
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Form/Schedule: F24N  
Transaction ID :

Run 5/12-13

Form/Schedule:  
Transaction ID:

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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| PAGE                 | 3 | OF | 3 |
| FOR SE OF FORM 24/48 |   |    |   |

|   |  |  |  |
|---|--|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOM PIONEERS ACTION NETWORK</b>                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00517433  |  |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report |  | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |

|  |                    |   |   |
|--|--------------------|---|---|
| Full Name of Payee<br><b>RedPrint Strategy</b>                             |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 12 / 2014</b>  |   |
| Mailing Address <b>311 S Fillmore St</b>                                   |                    | Amount<br><b>5000.00</b>  |   |
| City<br><b>Arlington</b>   | State<br><b>VA</b> | Zip Code<br><b>22204</b>  | Transaction ID : <b>SE.4224</b>   |
| Purpose of Expenditure<br><b>Media Consulting and Services</b>             |                    | Category/Type   | Date of Disbursement or Obligation<br>MM / DD / YYYY  |
| Name of Federal Candidate<br><b>SHANE OSBORN</b>                           |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose  | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NE</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>24714.50</b> |                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |   |

|   |       |   |  |
|---|-------|---|--|
| Full Name of Payee                                      |       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY   |  |
| Mailing Address   |       | Amount  |  |
| City  | State | Zip Code  | Date of Disbursement or Obligation<br>MM / DD / YYYY   |
| Purpose of Expenditure                                  |       | Category/Type   |  |
| Name of Federal Candidate                               |       | <input type="checkbox"/> Support<br><input type="checkbox"/> Oppose   | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date<br>Per Election for Office Sought |       | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |  |

|   |                 |
|---|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶    | <b>5000.00</b>  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶ |                 |
| (c) TOTAL Independent Expenditures..... ▶                   | <b>34714.50</b> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Luke McAlpin*

[Electronically Filed]

Date

MM / DD / YYYY  
**05 / 14 / 2014**

Signature